

**Information Governance**

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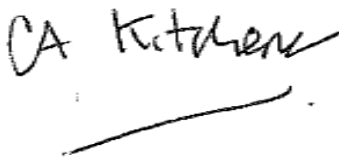
22 August 2023

**Our reference: FOI DA4586a**

I am responding to your request for a further internal review under the Freedom of Information Act 2000 which was received on 28 July 2023. This was regarding our responses on 21 March, 20 April and 24 July 2023.

I confirm that I have now undertaken a further review of your request and am enclosing an updated response which is attached to the end of this letter. Please do not hesitate to contact me on the contact details above if you have any further queries.

Yours sincerely,



Chris Kitchener  
Associate Director of Information Governance and Data Protection Officer

If you are dissatisfied with the Trust's response to your FOIA request then you should contact us and we will arrange for an internal review of this decision.

If you remain dissatisfied with the decision following our response to your complaint, you may write to the Information Commissioner for a decision under Section 50 of the Freedom of Information Act 2000. The Information Commissioner can be contacted at:

Information Commissioner's Office  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF

Tel: 0303 123 1113  
Web: [www.ico.org.uk](http://www.ico.org.uk)

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**Chief Executive:** Paul Calaminus  
**Chair:** Eileen Taylor

**Request:**

**Question 3:** Can you please explain why the original response defined a 'direct contact' as "...*face-to-face, telephone, or video*" but in your latest answer 'telephone' has mysteriously disappeared from the definition? In your latest answer you say, "*What stops the clock is an achieved direct contact with the young person, parents or carer of the young person*". I am understanding this to mean that the service will in some cases stop the waiting times clock for a 'direct contact' with the parent or carer **ONLY**, without the young person having been presented. This interpretation is based on the fact that in your initial response to this question you wrote: "...direct contact is appointment with child / young person **or** family." [emphasis added].

**Answer:** The Trust has liaised with staff and they have advised that the original response was based on NHSE national guidelines. ELFT have chosen to use the subset of the guidelines that excludes telephone contact.

Prior to a CED assessment appointment all contacts are with a either third party or CYP/family and are recorded as indirect until the assessment appointment takes place.

**Question 4:** We still lack a clear explanation of what the data supplied on 21 March in response to this question actually measures.

In your latest response you state that the data provided covers "*Waiting time from clock reset date to second appointment*". This means that it is *the median and mean gaps between the clock reset contact and the second face-to-face contact*." Please can you explain what the "*clock reset contact*" is? Also is the "*second face-to-face contact*" an assessment or a treatment session?

**Answer:** The Trust operates under the national guidelines and therefore does not reset the clock like CORE CAMHS referrals.

Clock starts:

- The referral is confirmed as having an ED or suspected ED.

Clock stops:

- The first definitive treatment starts i.e. on the day the first session of NICE-approved treatment for the eating disorder is delivered. Regardless of setting; treatment could be delivered by community eating disorder service (CED-CYP), generic CAMHS, psychiatric in-patient unit.

Additional information for Clock Stops for non-treatment (waiting time ends):

- A clinical decision has been reached not to treat as ED or FEP/ possible 'at risk' mental state is not evident following assessment.

In your response to the first internal review (sent 20 April), you stated that: "*The data provided relates to the time between referral receipt and the first assessment appointment*." This appears to contradict how you defined the scope of this data in both the original response and the most recent response of 24 July. Was this information you supplied in the first internal review incorrect?

**Answer:** Previous responses have included definitions of scope that were used to obtain the information from the clinical system. We apologise for any confusion.



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For completeness, the table below details the mean and median time between the clock stop date and the next subsequent individual or single family treatment appointment.

<b>Financial year</b>	<b>Mean (in calendar days)</b>	<b>Median (in calendar days)</b>
2019/20	39	14
2020/21	28	13
2021/22	39	19
2022/23	46	22



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**Request:**

**Question 1:** Regarding question 3 the original response referred to achieving “direct contact on a referral” and then defined this to include “...appointment with child / young person OR family [emphasis added]”. When seeking clarification on 3 April, I asked “From what has been written here, do I understand correctly that the service could potentially stop the waiting times clock solely due to a phone call with a family member?”. The response did not answer this question. Is this a Yes or No?

**Answer:** No.

What stops the clock is an achieved direct contact with the young person, parents or carer of the young person, which could be through face-to-face or video. The direct contact has to be clinically meaningful and relevant. This means that direct contact would cover factors such as symptoms and experiences, feeling, thoughts, actions, physical health and wellbeing, treatment and care etc. At initial assessment (face to face) a full history is taken, physical health examination including vitals, ECG. Bloods, risk assessment completed and initial care plan and treatment commenced as needed.

**Question 2:** Regarding question 4, in your response you state: “The data provided relates to the time between referral receipt and the first assessment appointment.” This is not what the question asked for.

Question 4 asked for the median and mean gaps between the date when the service stops the treatment waiting times clock (see questions 1-3), and the “subsequent individual or single family (not group) treatment appointment”. Judging from your answers to questions 1-3 in your case this would presumably refer to the gap between assessment appointment and the start of treatment. The principle behind this question is that it would mean little to patients and their families if they can access treatment quickly but then face a shadow waiting list of several weeks or months before they are seen again. Collecting data of this kind is recommended in the national guidance (see ‘Contextual measures’ on page 16).

**Answer:** The data provided states that it is the “Waiting time from clock reset date to second appointment”. This means that it is the median and mean gaps between the clock reset contact and the second face-to-face contact.



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Original question	Original response	Further question	Revised response										
<p>I am writing to you under the Freedom of Information (FOI) Act 2000 to request information regarding the Trusts' measurement of its performance against the 'Access and Waiting Time Standard for Children and Young People with an Eating Disorder'.</p>													
<p><b>Question 1. At what point – from the list below does the Community Eating Disorder Service/s for Children and Young People and any other relevant mental Health services provided by your Trust currently stop the 'waiting times clock' for children and young people with an eating disorder?</b></p> <p>If the Trust provides more than one relevant service, please list answers separately for each.</p> <ul style="list-style-type: none"> <li>Initial phone call to the patient and/or parents/guardians</li> </ul>	<p>Our Community Eating Disorder Service/s for Children and Young People is operating under the national guideline and monitored by the NHS England using the national guideline.</p> <p>Please see the link below for national guideline for stopping the 'waiting times clock':</p> <p><a href="https://www.england.nhs.uk/mental-health/resources/access-waiting-time/">https://www.england.nhs.uk/mental-health/resources/access-waiting-time/</a></p>	<p>Please can you answer this question? I am familiar with the national guidance, however there are differing interpretations of it across the country, which is the main reason why we conducted this request</p>	<p>Please see table below:</p> <table border="1" data-bbox="1617 735 2119 1337"> <thead> <tr> <th>Contact type</th> <th>Clock stop (Yes/No)</th> </tr> </thead> <tbody> <tr> <td>Initial phone call to patient &amp;/or parent/guardian</td> <td>This is not a discrete service. We are therefore unable to provide a response.</td> </tr> <tr> <td>Parent/guardian psychoeducation group</td> <td>No</td> </tr> <tr> <td>Onward referral to a non-NHS organisation</td> <td>Clock stops when referral is discharged</td> </tr> <tr> <td>Assessment appointment (in</td> <td></td> </tr> </tbody> </table>	Contact type	Clock stop (Yes/No)	Initial phone call to patient &/or parent/guardian	This is not a discrete service. We are therefore unable to provide a response.	Parent/guardian psychoeducation group	No	Onward referral to a non-NHS organisation	Clock stops when referral is discharged	Assessment appointment (in	
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<ul style="list-style-type: none"> <li>• Parent/guardian psychoeducation group</li> <li>• Onward referral to a non-NHS organisation</li> <li>• Assessment appointment (in person or by video call)</li> <li>• Second individual appointment for the patient (with or without family present) i.e. First full treatment appointment</li> <li>• At another time, please specify.</li> </ul>			person or by video call)	Yes if the appointment is assessment
Second individual appointment for the patient (with or without family present) i.e. First full treatment appointment	At another time, please specify	No		
<p><b>Question 2. Does the Community Eating Disorder Service/s for Children and Young People and any other relevant mental health services provided by your Trust provide the assessment and first treatment session for children and young people with an eating disorder on the same date? If the Trust provides more than one relevant service, please list answers separately for each.</b></p>	<p>Depending on the complexity of the referral and available appointment slots.</p>			
<p><b>Question 3. Please list the clinical interventions that the Trust currently uses as justifications to stop the 'waiting times clock' for</b></p>	<p>What stops the clock is an achieved direct contact on a referral, which could be face-to-face, telephone or video, which is not closed as 'inappropriate'. Third party contacts do not count.</p>	<p>From what has been written here, do I understand correctly that the service could potentially stop the waiting times clock solely due to a</p>	<p>The waiting times clock is only stopped when an assessment appointment takes place.</p>	



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<p>children and young people with an eating disorder. If the Trust provides more than one relevant service, please list answers separately for each.</p>	<p>Appointment is recorded on the clinical system as direct contact; direct contact is appointment with child / young person or family, this can be either face-to-face, via phone or video.</p>	<p>phone call with a family member? Please can you provide a relevant answer to this question? The <a href="#">national reporting guidance</a> (page 12) specifies the types of clinical intervention that – when started – can be used to justify stopping the waiting times clock.</p>																
<p><b>Question 4. Please disclose the median and mean gaps (in calendar days) between the appointment used to stop the ‘waiting times clock’ and the subsequent individual or single family (not group) treatment appointment for children and young people with an eating disorder. Please do this for each of the (tax) years listed below, based on the year in which the clock was stopped. If the Trust provides more than one relevant service, please list answers separately for each.</b></p> <ul style="list-style-type: none"> <li>▪ <b>2019/20 (tax year)</b></li> </ul>	<table border="1" data-bbox="555 667 1158 1038"> <thead> <tr> <th data-bbox="555 667 721 874">Financial year</th> <th data-bbox="721 667 972 874">Mean Treatment Waiting Time (in calendar days)</th> <th data-bbox="972 667 1158 874">Median Treatment Waiting Time (in calendar days)</th> </tr> </thead> <tbody> <tr> <td data-bbox="555 874 721 914">2019/20</td> <td data-bbox="721 874 972 914">39</td> <td data-bbox="972 874 1158 914">14</td> </tr> <tr> <td data-bbox="555 914 721 954">2020/21</td> <td data-bbox="721 914 972 954">28</td> <td data-bbox="972 914 1158 954">13</td> </tr> <tr> <td data-bbox="555 954 721 994">2021/22</td> <td data-bbox="721 954 972 994">39</td> <td data-bbox="972 954 1158 994">19</td> </tr> <tr> <td data-bbox="555 994 721 1038">2022/23</td> <td data-bbox="721 994 972 1038">46</td> <td data-bbox="972 994 1158 1038">22</td> </tr> </tbody> </table> <p>Waiting time from clock reset date to second appointment is used for treatment waiting time calculation.</p>	Financial year	Mean Treatment Waiting Time (in calendar days)	Median Treatment Waiting Time (in calendar days)	2019/20	39	14	2020/21	28	13	2021/22	39	19	2022/23	46	22	<p>Due to the partial answers to questions 1-3 I am unclear on what the data provided in answer to question 4 covers</p>	<p>The data provided relates to the time between referral receipt and the first assessment appointment.</p>
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